

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Mong-Ling Chiao et al.

5 Examiner: THOMAS, SHANE M Art Unit: 2186
Appl. No.: 10/064,414 Filing Date: 07/11/2002
Patent No.: US 6,904,493 B2 Issue Date: 06/07/2005
Docket No.: ASIP0004USA

10 Title: SECURE FLASH MEMORY DEVICE AND METHOD OF
OPERATION

To: Deposit Account Branch
Commissioner for Patents
15 P.O. Box 1450
Alexandria VA 22313-1450

Subject: Status Inquiry about Request for Deduction

20 Dear Sir,

The applicant submitted a "Request for Deduction" on 04/13/2006 (Attachment).
That was a request to deduct \$300 for excess claims in the amendment filed on
01/04/2005. The applicant recently found that the USPTO has not deducted the said
25 fee yet so far.

Please deduct the excess claims fee \$300 from the deposit account no. 50-3105 as
soon as possible. Your quick response will be appreciated.

30

Sincerely yours,

/Winston Hsu/

Date: 10/31/2011

Winston Hsu, Patent Agent No. 41,526

5 P.O. BOX 506, Merrifield, VA 22116, U.S.A.

Voice Mail: 302-729-1562

Facsimile: 806-498-6673

e-mail : winstonhsu@naipo.com

10 Note: Please leave a message in my voice mail if you need to talk to me. (The time in D.C. is 12 hours behind the Taiwan time, i.e. 9 AM in D.C. = 9 PM in Taiwan.)

Attachment

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/064,414
Filing Date	07/11/2002
First Named Inventor	Mong-Ling Chiao
Art Unit	2186
Examiner Name	THOMAS, SHANE M
Attorney Docket Number	ASIP0004USA

Total Number of Pages in This Submission

4

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	I A copy of FEE TRANSMITTAL submitted on 01/04/2005
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

Request for Deduction

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	North America Intellectual Property Corporation		
Signature	<i>Winston Hsu</i>		
Printed name	Winston Hsu		
Date	4/13/2006	Reg. No.	41,526

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	<i>Janice Chen</i>		
Typed or printed name	Janice Chen	Date	4/13/2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

PATENT

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Applicant(s): Mong-Ling Chiao et al.

5 Examiner: THOMAS, SHANE M Art Unit: 2186
Serial No.: 10/064,414 Filing Date: 07/11/2002
Docket No.: ASIP0004USA

Title: SECURE FLASH MEMORY DEVICE AND METHOD OF OPERATION

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Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

15

Subject: Request for Deduction

Dear Sir,

20 The applicant filed a Response to the Office Action mailed
on 10/06/2004 and authorized the USPTO to charged the excess
claim fee \$300.00 from the Deposit Account No. 50-3105
(Attachment 1). The applicant recently found that the USPTO
did not charge any fee for the ROA filed on 01/04/2005 so
25 far.

Please deduct the excess claim fee \$300.00 from the Deposit
Account No. 50-3105 as soon as possible. Your quick response
will be appreciated.

30

Sincerely yours,

Winston Hsu

Date: 04/13/2006

5 Winston Hsu, Patent Agent No. 41,526
P.O. BOX 506, Merrifield, VA 22116, U.S.A.
Voice Mail: 302-729-1562
Facsimile: 806-498-6673
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) 10

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Attachment 1

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 300.00**Complete if Known**

Application Number	10/064,414
Filing Date	07/11/2002
First Named Inventor	Mong-Ling Chiao
Examiner Name	Thomas, Shane M
Art Unit	2186
Attorney Docket No.	ASIP0004USA

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-3105 Deposit Account Name: North America Intellectual Property Corp.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
22	- 20 or HP = 2	x 50 =	100			

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
4	- 3 or HP = 1	x 200 =	200

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY

Signature	<u>Winston Hsu</u>	Registration No. (Attorney/Agent)	41,526	Telephone	302-729-1562
Name (Print/Type)	Winston Hsu	Date	01/04/2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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